

304 R.375

Work Order ID 89654

89654

Page 1

Item ID: D2327-3

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Spacer Bushing

Start Date: 29/08/2012 Start Qty: 20.00

20

Cust Item ID:

Required Date: 04/09/2012 Req'd Qty: 20.00

20

Customer:

Reference:

Approvals: Process Plan: MLJDate: 12/08/29 Tooling:

Run Start *NR1*

QC:

Date: SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr

Revision Nbr

D2327

Rev D

100

0.00

100

Hardinge CNC LATHE SMALL

Hardinge

Memo

0.00

Hardinge CNC Lathe Small

Turn per Folio FA232 and Dwg D2327 Deburr

H 12/09/23

22

Ø

110

0.00

110

QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

H 12/09/23

22

Ø

120

0.00

120

QC8- Inspect parts - second check

QC

Memo

0.00

Quality Control

B.A 12/09/23

22

Ø

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION <div style="display: flex; justify-content: space-around;"> <div>Rework <input type="checkbox"/></div> <div>Skid-tube <input type="checkbox"/></div> <div>Crosstube <input type="checkbox"/></div> <div>Water Jet <input type="checkbox"/></div> <div>Engineering <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Scrap <input type="checkbox"/></div> <div>Machining <input type="checkbox"/></div> <div>Small Fab <input type="checkbox"/></div> <div>Prod. Eng. Coord. <input type="checkbox"/></div> <div>Quality <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Use-as-is <input type="checkbox"/></div> <div>Thermoforming <input type="checkbox"/></div> <div>Finishing <input type="checkbox"/></div> <div>Rec/Store/Packaging <input type="checkbox"/></div> <div>Other <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Work Order Update <input type="checkbox"/></div> <div>Large Fab <input type="checkbox"/></div> <div>Composite <input type="checkbox"/></div> <div>Supplier <input type="checkbox"/></div> </div>	
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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☐ Ovalized
☐ Over/Under tolerance
☐ Part Incorrect
☐ Part Lost/Missing
☐ Part Moved
☐ Positioned Wrong
☐ Power Loss/Surge

☐ Pressure/Forced
☐ Temperature/Cure
☐ Weld
☐ Wrong Stock Pulled
☐ Other

Work Order ID 89654***89654***

Page 2

August-29-12 10:28:02 AM

Item ID: D2327-3

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Spacer Bushing

Start Date: 29/08/2012 Start Qty: 20.00

20

Cust Item ID:

Required Date: 04/09/2012 Req'd Qty: 20.00

20

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

Identify as per dwg & Stock Location: WA

0.00

130

Packaging

Memo

0.00

Packaging

*****STOCK IN BASKET CELL*****

12/8/27 (22)

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

ML5 12-09-27ML5 12-09-27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Doc/Data <input type="checkbox"/>											
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Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

August-29-12 10:28:07 AM

Page 1

Work Order ID: 89654

89654

Parent Item: D2327-3

D2327-3

Parent Item Name: Spacer Bushing

Start Date: 29/08/2012

Required Date: 04/09/2012

Start Qty: 20.00

Required Qty: 20.00

Comments: IPP F05.11.02Removed 303 SSKJ/EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

M304R0.375		Purchased	No			100	f	86.5300	0.1563	3.290526			
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M304R0 375

**

3.500'

12/09/23

304 ROUND BAR 0.375

Location

Loc Qty

Loc Code

MAT029

86.53

119346

1.564

120204

2.721

121380

4.807

121728

24.537

122504

7.984

122831

44.917

3.500'

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION <div style="display: flex; justify-content: space-around;"> <div>Rework <input type="checkbox"/></div> <div>Skid-tube <input type="checkbox"/></div> <div>Crosstube <input type="checkbox"/></div> <div>Water Jet <input type="checkbox"/></div> <div>Engineering <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Scrap <input type="checkbox"/></div> <div>Machining <input type="checkbox"/></div> <div>Small Fab <input type="checkbox"/></div> <div>Prod. Eng. Coord. <input type="checkbox"/></div> <div>Quality <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Use-as-is <input type="checkbox"/></div> <div>Thermoforming <input type="checkbox"/></div> <div>Finishing <input type="checkbox"/></div> <div>Rec/Store/Packaging <input type="checkbox"/></div> <div>Other <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-around;"> <div>Work Order Update <input type="checkbox"/></div> <div>Large Fab <input type="checkbox"/></div> <div>Composite <input type="checkbox"/></div> <div>Supplier <input type="checkbox"/></div> </div>	
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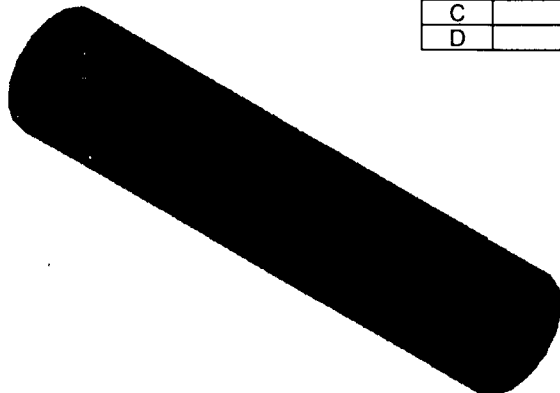
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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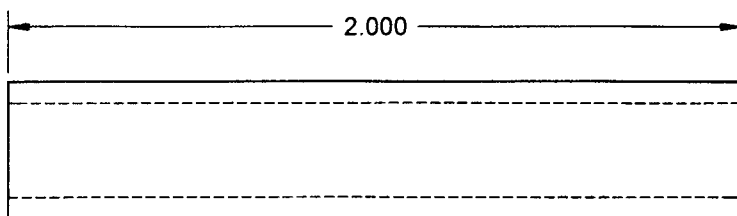
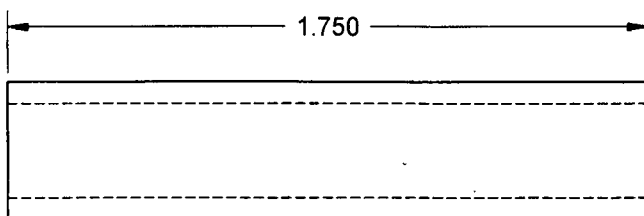
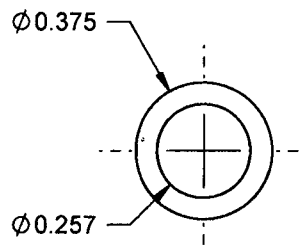
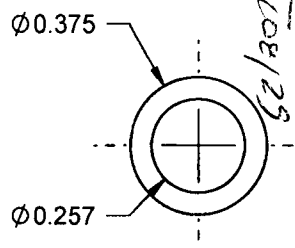
DART

DESIGN BW	DRAWN BY CB	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED LE	APPROVED H	DRAWING NO. D2327	REV. D SHEET 1 OF 1
DATE 06.10.12	TITLE SPACER BUSHING		SCALE 2:1
REV	DATE	DESCRIPTION	
A	94.12.17	NEW ISSUE	
B	95.12.06	LENGTH CHANGE	
C	03.05.13	303 SS SPEC ADDED	
D	06.10.12	REMOVE 303 SS MATERIAL	



RELEASED

06.11.14

**D2327-1 SPACER BUSHING****D2327-3 SPACER BUSHING****NOTES:**

- 1) MATERIAL: AISI 304/316 SS, Ø0.375, 0.065 WALL SEAMLESS ROUND TUBING
(REF. DART SPEC M304TR0.375W.065)
- 2) FINISH: NONE
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) ALL DIMENSIONS ARE IN INCHES UNLESS OTHERWISE NOTED
- 5) BREAK ALL SHARP CORNERS TO 0.010 MAX



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SHOP COPY
RETURN TOUNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 29654/115
12/08/23

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
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Equip/Tooling <input type="checkbox"/>											
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